



8P.0604

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application of:

TODD D. NEWMAN

Application No.: 09/916,436

Filed: July 30, 2001

For: REDUCING METAMERISM IN

IN COLOR MANAGEMENT SYSTEMS : September 27, 2001

Examiner: N/Y/A

Group Art Unit: 2672

Commissioner for Patents  
Washington, D.C. 20231

LETTER TRANSMITTING FORMAL DRAWINGS

Sir:

Transmitted herewith are 18 sheets of formal drawings to be substituted for the corresponding drawing sheets presently on file in the above-identified application.

Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant

Registration No. 32622

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3801  
Facsimile: (212) 218-2200



2672

In re Application of:

Docket No. 38P.0604

TODD D. NEWMAN

Application No.: 09/916,436

Examiner: Not Yet Assigned

Filed: July 30, 2001

Group Art Unit: 2672

For: REDUCING METAMERISM IN COLOR  
MANAGEMENT SYSTEMS

Date: September 27, 2001

COMMISSIONER FOR PATENTS  
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 62	MINUS	** 62	= 0	x \$9 \$18	- 0 -
INDEP. CLAIMS	* 4	MINUS	*** 4	= 0	x \$40 \$80	- 0 -
Fee for Multiple Dependent claims \$135°/\$270						None
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

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Technology Center 2600  
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Enter  
#4  
7/27/03

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$\_\_\_\_ is enclosed.

☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$\_\_\_\_ to cover the fee for a \_\_\_\_ month extension is enclosed.

☐ A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant

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